

# MIOCR MATTERS

A quarterly update on the *Mentally Ill Offender Crime Reduction Grant Program*



Corrections Standards Authority

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## State Budget Supports MIOCR Projects. . .

The uncertainty counties have faced about the availability of state funding for their current MIOCR projects came to an end – with a big sigh of relief – when the Governor signed the State Budget in August. Although the Budget Conference Committee had eliminated the MIOCR funds included in the Governor's May Revision proposal, the State's Sheriffs and Chief Probation Officers as well as numerous other advocates of the MIOCR program continued their lobbying efforts and funds were restored before the Legislature sent the budget bill to the Governor. In short, appropriations for the MIOCR Program will enable the CSA to fully fund the 44 MIOCR grants that began on January 1, 2007 and are set to expire on June 30, 2008. It should be noted that the Administration is in the process of developing the Governor's Budget for 2008-09, which the Governor will unveil on January 10, 2008.



## Preliminary Outcome Data Point to Promising Results. . .

While there is no statutory requirement for any type of evaluation of the 44 MIOCR projects (perhaps in part because the statewide evaluation of the previous MIOCR demonstration projects provided ample evidence of their effectiveness in reducing recidivism among adult offenders with mental illness), the CSA understands the importance of performance measures in the development of policy priorities and the allocation of scarce resources. For this reason, the CSA is requiring grantees to collect and report data, on a monthly basis, that will enable staff to describe the populations served by the projects and to assess their impact through "before and after enrollment" comparisons on key outcome variables related to recidivism (e.g., bookings and petitions filed, days in jail/juvenile hall) and client functioning (e.g., employment, housing status, school attendance).

The findings to date, although very preliminary, indicate that the MIOCR projects which are operational (a few grantees have not begun enrolling participants) are achieving the desired goal of helping keep mentally ill offenders from further involvement in the justice system through the provision of mental health treatment and support services. Of particular interest is a projected **96% reduction in jail days** for adult mentally ill offenders participating in MIOCR projects and a projected **70% reduction in detention days** for participating juvenile offenders (seven months of data). Please see the MIOCR Matters Data Supplement issued in conjunction with this quarterly bulletin for a summary of the early findings from this data collection effort as well as a case study

## CiMH Training

Upcoming training that will be offered to MIOCR project staff as part of the ongoing partnership between CiMH and the CSA includes two-day sessions on Crisis Intervention Teams (November 1-2 in Sacramento and November 14-15 in Anaheim) and a one-day information session on Assertive Community Treatment in late November or early December.

## MIOCR Grantees Benefit from CiMH Policy Forum and Training. . .

MIOCR project staff from several counties participated in the Mental Health Policy Forum held in Napa on September 6. Sponsored by the California Institute for Mental Health (CiMH), the forum included a presentation by California Department of Corrections and Rehabilitation Secretary James Tilton and workshops on mental health courts, crisis intervention teams, services for transitional age youth and other key topics. According to Khani Gustafson, CiMH Project Manager, participants were enthusiastic and engaged in positive dialogue in all of the workshops.



## Spotlight on Humboldt County's Project for Juvenile Offenders . . .

Humboldt County's Healthy Alternatives for Families Program is an intervention project for youth involved with the juvenile justice system in need of specialized services. The program provides a variety of services to participating youth and their families, including Aggression Replacement Training, Gang Resistance Intervention Programs, and Alcohol and Other Drug treatment services, but its principal treatment mode is Functional Family Therapy (FFT).

### Whatever It Takes...

A Healthy Alternatives participant was recently suspended from summer school. During an office visit, she discussed barriers that hindered her success in school as well as what she felt she needed personally. It was determined a major obstacle was a severe reading deficiency. The participant felt working with a reading tutor would help, so with the use of MIOCR grant funds, one was hired. Tutoring sessions take place three (3) times a week. These sessions have not only improved her reading ability but also have given her a positive role model and greater confidence for starting the new school year.

The program is designed so that youth report to the Probation Office once a week. During this visit, minors' needs are discussed and individual case plans are created or modified to meet the identified needs. In addition to reporting to the Probation Office, participants and families are provided weekly FFT. These services take place either in the therapist's office or in the homes of participants, as circumstances allow.

Members of the multi-disciplinary team (comprised of a probation officer, supervising probation officer and therapist) discuss the participation and progress of program youth/families at least once a week. The constant communication, cooperation and support between Probation and Mental Health have allowed the program to run more effectively and efficiently as referrals, assessments and other issues that arise during the week are addressed by the team immediately.

A special bi-weekly juvenile mental health court has been established in which program participants and family members, along with the multi-disciplinary team, appear for review hearings. These reviews are held in open court and participants report their progress as well as any issues affecting the family directly to the judge.

Commenting on the program's initial success, Probation Division Director Bill Damiano says, "The Healthy Alternatives program has filled an important gap in our continuum of care and has been well received by participants and families. One indicator is the positive response from families who have fared less well previously in other juvenile justice programs. Historically, we've had a difficult time getting parents involved in our intensive Probation programs. FFT addresses that issue directly, involving the whole family and improving the dynamics/skill sets in a non-threatening way. We remain very optimistic about the outcomes for this program."



## Spotlight on San Francisco's RENEW Project . . .

San Francisco's Recovery and Employment for a New Life (RENEW) program offers an array of services to adult mentally ill offenders. Building on the foundation set by previous MIOCR grants, the RENEW program continues the joint efforts between the Sheriff's Department, Jail Psychiatric Services (JPS), Adult Probation, Citywide Case Management, Department of Public Health, and the Courts. "The funding San Francisco received through its MIOCR grants has consistently shown the effectiveness of intensive treatment interventions in improving the lives of mentally ill individuals who encounter the criminal justice system. I am proud of the work of all our partners in these efforts," stated Sheriff Michael Hennessey.

One of the most successful components of the RENEW program is San Francisco's Behavioral Health Court (BHC), which began in November 2002 and continues to receive accolades for providing mentally ill offenders alternatives to incarceration by connecting them with appropriate treatment and support services within the community. Judge Mary Morgan's BHC, which is frequently used as a model for counties seeking

to implement a mental health court, was recently featured in the San Francisco Weekly newspaper in an article entitled "[Breaking the Cycle](http://www.sfweekly.com/2007-08-08/news/breaking-the-cycle)." <sup>1</sup>

Even more newsworthy, in terms of the potential impact of MIOCR projects with mental health courts, are the findings of a scientific evaluation of San Francisco's Behavioral Health Court. This evaluation, which was published in the September 2007 edition of the [American Journal of Psychiatry](http://ajp.psychiatryonline.org/cgi/gca?gca=164%2F9%2F1395&submit.x=124&submit.y=18),<sup>2</sup> provides clear and compelling evidence that mental health courts can achieve their goal of reducing recidivism among offenders with mental disorders. Among other things, the study found that:

- Mental health court participants showed a longer time without any new charges or new charges for violent crimes compared with similar individuals who did not participate in the program;
- After 18 months of enrollment in the mental health court program, the likelihood of participants being charged with any new crimes was about **26% lower** than that of comparable individuals who received treatment as usual; and,
- After 18 months of enrollment in the mental health court program, the likelihood of mental health court participants being charged with new violent crimes was **55% lower** than that of individuals who received treatment as usual.



As part of San Francisco's efforts to close system gaps and provide a continuum of care for offenders released into the community, JPS and Citywide have implemented IMR (Illness Management and Recovery) as part of clients' treatment schedule, both in-custody and post-custody. Through weekly group meetings, practitioners offer information, skill-building and strategies to clients to better understand their mental illness and manage their symptoms. As part of the program, clients engage in group discussions and keep journals of their progress.

Another component of the RENEW project is the Supported Employment program. Created by Citywide Occupational Therapists, this component allows individuals to learn about/discuss work-related topics and links clients interested in employment opportunities with jobs at Citywide, San Francisco General Hospital and in the community. In addition, RENEW includes a pilot program in which San Francisco's NoVA (No Violence Alliance) Project – a collaborative effort that provides wraparound services to address community violence prevention – is providing services such as substance abuse treatment, life skills training and case management for the first time to mentally ill individuals with a history of violence.

<sup>1</sup> <http://www.sfweekly.com/2007-08-08/news/breaking-the-cycle>

<sup>2</sup> <http://ajp.psychiatryonline.org/cgi/gca?gca=164%2F9%2F1395&submit.x=124&submit.y=18>

## ***THE MIOCR TEAM***

Lynda Frost  
Field Representative  
916.445.4099  
[Lynda.Frost@cdcr.ca.gov](mailto:Lynda.Frost@cdcr.ca.gov)

Helene Zentner  
Consultant  
916.323.8631  
[Helene.Zentner@cdcr.ca.gov](mailto:Helene.Zentner@cdcr.ca.gov)

Jaymie Nannini  
Staff Services Analyst  
916.323.8600  
[Jaymie.Nannini@cdcr.ca.gov](mailto:Jaymie.Nannini@cdcr.ca.gov)

[http://www.cdcr.ca.gov/Divisions\\_Boards/CSA/\\_CPP/Grants/MIOCR/MIOCRG.html](http://www.cdcr.ca.gov/Divisions_Boards/CSA/_CPP/Grants/MIOCR/MIOCRG.html)